PTO/SB/06 (08-03)

Approved for use through 7/3/2/2006. OMB 0651-0032

U.S. Palant and Trademark Office; U.S. DEPARTMENT OF COMMER CE

PATENT APPLICATION For a required to respond to a collection of information unless it displays a valid OMB control unless.

Substitute for Form PTO-875											Application or Dockel Number				
	CLA	IMS AS F									10	125	ZZ,	<u> </u>	
		(Calumn 1)		(Column 2)		_	SMALL ENTIT		YTITN	y OR		OTHER TH		THAN NTITY	
BASIC FEE .		NUMBER I	ILED	NUMBER EXTRA		_	RAT	E	FEE	-1		RATE	T	.FEE	
(37 CFR 1.16(a									\$		OR				
(37 CFR 1.16(c)) INDEPENDENT CLAIMS		minus 20 =					X \$						\neg	<u>'</u>	
(37 CFR 1.16(b))		· minus 3 =		•		7	X S	-		7	OR	× 1	-		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(4))						71		-			DR	X 5	-		
"If the difference in column 1 is less than zero, enter "0" in column 2.							- 7 3	-		- °	OR .	+ \$	<u>-</u>		
CLAIMS AS AMENDED - PART II							TOTAL	· L		_]	R	TOTAL	L		
	OLAIMS A	10 AMENL	EU – PAI	₹T											
(Column 1) (Column CLAIMS HIGHEST					(Column 3))	SMA	LL EN	TITY	. (R	OTH	ER TH	IAN	
∀	REMAI	NING	NUI	HEST MBER	PRESENT	7 [RATE	T	ADDI-	7	Γ	SMAL	LEN	IIIY	
<u> </u>	AFTI AMEND			OUSLY FOR	EXTRA	\prod			TIONAL		- [RATE		ADDI- TIONAL	
Total (37 GFR 1.184c	» dl	Min	us "A4	,	-	1 1		1	FEE	1	-	:0	-	FEE	
Total (37 GFR 1.186) Z Independent (37 GFR 1.186) Z EIRST COCCO	» /	Min	154		1=	7 1	(5			OF	_ <u> </u> -	<u>,, 50</u>	+		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM (37 CFR 1.16(d))								╫		OR	1	:200	╀	/	
				137 0	-K 1.15(0))	-	OTAL	+		OR		· 360	\perp	<u> -</u>	
							DOT LEE			OR	T A	OTAL DDL FEE	\Box		
	(Calumn CLAIM			mn 2)	(Column 3)										
	REMAIN	NG	HIGH NUME	BER	PRESENT		RATE		DD1-	1	广		T-		
Yotal	AMENIOM	NT	PREVIO PAID I		EXTRA			T	ONAL			RATE		DDI- ONAL	
(STCERT TEACH	44	2 Minus	1-4	6							-			FEE	
Independent (37 CFR 1.16(b))	1. 4	Minus	" 7	1	=/	x :		-		UR	-	-			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								+-		OR	X	·			
•	(3) GR 1,16(d)							 -		OR	1:				
							TAL -	<u> </u>		OR		TAL D1 FEE			
	(Column 1)		(Colum		(Column 3)			_				_			
	REMAININ	G	HIGHES NUMBE	R	PRESENT		ATE	AD	DI.						
Total	AMENDMEN		PREVIOU PAID FO		EXTRA	1		TIOI	VAL		l '	RATE	AD TIOI	VAL	
(37 CFR 1.15(c))		ýlinus	••	7	•	× s							FE	Ε	
(37 CFR 1.16(b))	•	Minus	***	-		× s		.	\neg	·OR	× 5_				
IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 137 CER 1 16/01									\dashv	OR	X S_				
			· ·			TOT/			\dashv	OR	+ \$_				
All the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 20, enter "										OR	ADD:	AL L FEE			
fine "Highest No	mhar Denvis	all being to a	MIHIS SPA	CE is le	ss than 20, ent	er "20".									
he 'Highest Nur	mber Previous!	Paid For (T	olal or Indep	endeni)	is the highest o	∵3". umb~:	farrad to the								

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Contidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.